

CASE NO.
Accepted by:
Date:
Acct # 101-5400-00-4458
Fees:

VARIANCE PLANNING APPLICATION (PRE-APPLICATION REQUIRED)

(incomplete applications, including checklist, will not be accepted)

PROJECT INFORMATION (Completed by Applicant)					
Development/Project Name:					
Address/Location:					
Parcel Number(s):	Pre-Application	Meeting Date: Pre-Applic		ation File No:	
Section:					
Township:	Planner:				
Range:					
Gross Area (Acre/sq. ft.):	Net Area (Acre/s	sq. ft.):		Zoning:	
APPLICANT INFORMATION (Single point of contact)					
Name:	me: Company:				
Address:					
City:		State:	Zip Code:		
Phone Number:		E-mail address:			
Signature of Applicant:		Date:			
PROPERTY OWNER					
Name:	Company:				
Address:					
City:		State: Zip Code:			
Phone Number:	E-mail address:				
Signature of Property Owner:	Date:				
Review times in accordance with <u>SB 1598 Policy</u>					



VARIANCE SUBMITTAL CHECKLIST PRE-APPLICATION REQUIRED

I acknowledge that the following items are required for processing of my application with the City of Avondale Development Services Department. I understand that the application will be not accepted without the following items.

TO BE COMPLETED BY PLANNER		DELIVERABLES			
YES	NO				
		Completed Planning Application			
		Applicant's and owner's signatures on Planning Application			
		Fees Residential: \$205 Non-residential: \$1,070 Note: Fees for variance requests for unauthorized construction/installation are double the amounts listed above.			
		Narrative describing all Zoning Ordinance standards that are included in the Variance request and an explanation as to why the request is necessary (5 copies)			
		Board of Adjustment Supplemental Questionnaire – see attached			
		1,000-foot radius property ownership map and list in Excel. Must be in Excel .xlsx file format per the attached instructions (1 printed copy and 1 Excel spreadsheet electronic copy)- see attached			
		Affidavit re: property ownership list – see attached			
		Title report/deed (2 copies)			
		Legal description of property on separate 81/2"x11" sheet (3 copies)			
		Floor plan 11"x17" folded (5 copies)			
		Site plan 11"x17" folded (5 copies)			
		Each item on the checklist scanned to disk or flash drive in PDF format and the property owners list spreadsheet in Excel format with label and date (1).			
Signatur	re:	Printed Name:			
Compan	ny:	Date:			
lf yo	u have	any questions regarding items on this checklist, please contact your project planner.			

Development & Engineering Services Department



BOARD OF ADJUSTMENT SUPPLEMENTAL QUESTIONNAIRE

DIRECTIONS: The following variance questionnaire must be answered prior to the acceptance of the application. In compliance with Arizona Law, Variances cannot be granted by a Board of Adjustment unless all required findings are affirmed.

1.	Please describe the special circumstances or conditions relating to the property (if any), which necessitate a Variance from Zoning Ordinance requirements. Special conditions/circumstances may include, but are not limited to, the size, shape, or topography of the subject property.
2.	Based upon the special circumstances/conditions cited above in question #1, please explain how a strict interpretation of the Zoning Ordinance would not allow development on your parcel similar to that on surrounding parcels within the same zoning district.
3.	Please describe how the requested variance is the minimum necessary to alleviate the hardship identified in your response to question #2.
4.	Please describe how granting the variance will not be detrimental to the property, neighboring properties, the neighborhood, or the community?
5.	Please describe how the hardship identified in your response to question #2 was not created by you, the property owner, and that the request for a Variance is not the result of personal inconvenience or financial hardship.

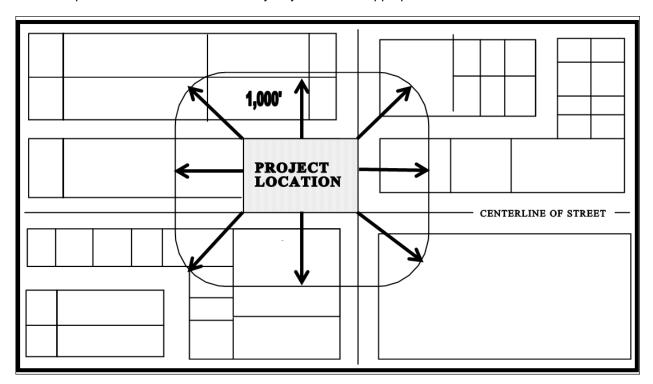


INSTRUCTIONS FOR PROPERTY OWNERSHIP LIST AND MAP

- 1. The applicant will obtain names and addresses of property owners within 1,000 feet of the site boundaries from the Maricopa County Assessor's Office, http://maps.mcassessor.maricopa.gov/ or from a title company using the last declared record of owner.
- 2. The applicant will provide a digital file in Microsoft Excel format containing the Assessor's Parcel Number (APN), property owner names, and addresses, each in a separate column. Verify information is correct and complete.

4	Α	В		D	E	F	G
1	APN	Owner	MAIL_ADDR1	MAIL_CITY	MAIL_STATE	MAIL_ZIP	MAIL_COUNTRY
2	10231375	2013-1 WER LP	901 MAIN ST STE 4700	DALLAS	TX	75202	USA
3	10231126	A AND S CORPORATION	10450 W MCDOWELL RD STE 101	AVONDALE	AZ	85392	USA
4	10231415	ABDO STEPHEN P/ELIZABETH M TR	25291 DERBYHILL DR	LAGUNA HILLS	CA	92653	USA
5	10231127	AMERICAN MINI STORAGE - AVONDALE LLC	729 QUIET HILLS FARM RD	ESCONDIDO	CA	920297309	USA

- 3. The applicant shall prepare parcel map showing subject property and all parcels within 1,000 feet of the project boundaries according to the County Assessor's Office or Title Company. See typical map below.
- 4. Where land that is the subject of a proposed change abuts or affects adjacent municipalities or unincorporated areas of the county, copies of the notice postcards shall be transmitted by City staff to the planning agency of the appropriate jurisdiction.
- 5. Where a Homeowners' Association (HOA) is within the 1,000 ft radius of the proposed project, copies of the notice postcards shall be transmitted by City staff to the appropriate HOA address.





AFFIDAVIT RE: PROPERTY OWNERSHIP LIST

Date: Project Name:	Case No.:			
Address /Legal Description of Property:				
I, certify the above application, and do hereby affirm the the ownership of property within 1,000 feet of th Assessor records on / / Month Day Year				
Applicant/Representative Signature:				
STATE OF) County of)	ss			
The foregoing instrument was acknowledged before me this day of, 20				
My Commission Expires:	Notary Public			